



BE WELL. BE SMART. BE PROTECTED.

Allstate at Work®

# accident insurance

## **off-the-job including a disability income benefit plus optional riders**

An accident can wreak havoc on your savings if you're not prepared. That's why there's accident insurance. It gives you a cushion to help cover medical expenses and living costs when you get hurt unexpectedly.

On average there are 11 unintentional-injury deaths and about 2,330 disabling injuries every hour during the course of a year.<sup>1</sup> Nearly 1 in 8 people sought medical attention or suffered at least one day of activity restriction because of an injury.<sup>1</sup>

Accident insurance can pay you a lump sum benefit for off-the-job accidental injuries, plus some medical benefits. Because accident insurance is supplemental, it works in addition to other insurance you may have. You can use the policy on its own or to fill a gap left by your other coverage.

- Benefits paid directly to you unless assigned
- Benefits paid regardless of other coverage
- Coverage for you, or you and your family
- Guaranteed renewable to age 70, subject to change in premiums by class

## **Would your finances survive an accidental injury?**

<sup>1</sup> National Safety Council, *Injury Facts*, 2003.



**Allstate®**

Workplace Division

# Allstate Workplace Division's (AWD) AP3 Accident Policy Benefits

When you buy this accident insurance, you pick Basic SI, Enhanced SI or Premier SI coverage. You can choose the amount of coverage to fit your budget or to ensure a certain benefit amount for covered injuries. **Benefit amounts indicated below in blue are the same for any covered insured.**

Benefits	COVERED	BASIC SI	ENHANCED SI	PREMIER SI
<b>Loss of Life or Limbs</b> AWD pays maximum amount shown for death. Loss of limb benefit amounts are based on injury (see Injury Benefit Amounts below). If an accident occurs while a covered person is a fare paying passenger on a scheduled common carrier, we pay a benefit equal to 3 times the amount shown.	Employee Spouse Children	up to <b>\$20,000</b> <b>\$10,000</b> <b>\$5,000</b>	up to <b>\$40,000</b> <b>\$20,000</b> <b>\$10,000</b>	up to <b>\$60,000</b> <b>\$30,000</b> <b>\$15,000</b>
<b>Dislocation or Fracture</b> AWD pays up to maximum amount shown. Amount paid based on injury (see Injury Benefit Amounts below). No benefit will be paid for any dislocation or fracture that is not listed in the Injury Benefit Amounts chart.	Employee Spouse Children	up to <b>\$2,000</b> <b>\$1,000</b> <b>\$500</b>	up to <b>\$4,000</b> <b>\$2,000</b> <b>\$1,000</b>	up to <b>\$6,000</b> <b>\$3,000</b> <b>\$1,500</b>
<b>Hospital Confinement</b> AWD pays the amount shown for each day a covered person is admitted to and confined as an inpatient in a hospital as a result of an injury up to a <b>maximum of 365 days</b> for each period of continuous hospital confinement. <sup>2</sup> (AP3 pays for days 1 through 90 and rider AP3EXT pays for days 91 through 365.)	Employee Spouse Children	<b>\$100/day</b>	<b>\$200/day</b>	<b>\$300/day</b>
<b>Ambulance (needed as a result of accidental injury)</b> AWD pays the amount shown for transfer to or from a hospital by regular ambulance.	Employee Spouse Children	regular <b>\$100</b> air <b>\$200</b>	regular <b>\$200</b> air <b>\$400</b>	regular <b>\$300</b> air <b>\$600</b>
AWD pays the amount shown for transfer to or from a hospital by air ambulance.				
<b>Medical Expenses</b> AWD pays up to amount shown for doctor fees, x-rays, and emergency services required as a result of an injury, and repair to sound natural teeth, if diagnosed by a licensed dentist to be a result of the accident. <sup>2</sup>	Employee Spouse Children	up to <b>\$250</b>	up to <b>\$500</b>	up to <b>\$750</b>
<b>Disability (Primary Insured Only)</b> AWD pays the amount shown when the insured employee is totally disabled for 3 full days; payable for only one disability at a time; <b>maximum benefit period 12 months</b> . For any period of disability less than one full month, 1/30th of the monthly disability amount is paid for each day of total disability. The insured employee is totally disabled when, due to an accidental injury as defined in the policy, is under the care of a physician, unless the physician states that no further treatment is needed; and is not able to do any and every important duty of his or her regular job (if the insured employee is retired he or she must be unable to engage in the normal and necessary activities of a retired person of like age and good health); and is not working at any job for pay or profit. (The maximum benefit period for AP3 is 6 months. Rider AP3EXT increases the maximum benefit period by 6 months and pays only after the disability benefit in the policy is exhausted.)	Employee Only	<b>\$600/mo.</b>	<b>\$1,200/mo.</b>	<b>\$1,800/mo.</b>

## Injury Benefit Amounts

The list below shows covered injury benefits for Enhanced SI coverage and one occurrence. Benefits for Basic SI coverage are 50% of the amounts shown. Benefits for Premier SI coverage are 150% of the amounts shown. A covered spouse gets 50% of the amounts shown; covered children get 25% of the amount shown. *An example:* If you buy Enhanced SI coverage and break your ankle, you'll receive \$1,600, which is the amount on the chart. If you had Premier SI coverage, you'd get \$2,400 for a broken ankle.

FOR THE LOSS OF:		FOR COMPLETE DISLOCATION OF:		FOR COMPLETE, SIMPLE OR CLOSED FRACTURE OF BONE OR BONES OF:			
Life, or both eyes, or both hands or arms, or both feet or legs, or one hand or arm and one foot or leg	\$40,000	Hip joint	\$4,000	Hip, thigh (femur), pelvis**	\$4,000	Two or more ribs, fingers or toes, bones of face or nose	\$600
		Knee joint*, bone or bones of the foot*, ankle joint	\$1,600	Skull**	\$3,800		
One eye, or one hand or arm, or one foot or leg	\$20,000	Wrist joint	\$1,400	Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	\$2,200	One rib, finger or toe, Coccyx	\$280
		Elbow joint	\$1,200				
one or more entire toes	\$2,000	Shoulder joint	\$800	Ankle, knee cap (patella), collarbone (clavicle), forearm (radius or ulna)	\$1,600		
one or more entire fingers	\$1,600	Bone or bones of the hand*, Collarbone	\$600				
		Two or more fingers or toes	\$280	Foot**, hand or wrist**	\$1,400		
		One finger or toe	\$120	Lower jaw**	\$800		

\*Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers). \*\*Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).

<sup>2</sup>Coverage only for hospitals and treatment in the US or its territories

**Premiums for Accident Policy (AP3) with Off-the-Job Accident Extended Benefit Rider (AP3EXT)** Basic SI Plan has 1 unit each of AP3 and AP3EXT. Enhanced SI Plan has 2 units each of AP3 and AP3EXT. Premier SI Plan has 3 units each of AP3 and AP3EXT.

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Weekly		Weekly		Weekly	
ind.	\$4.56	ind.	\$8.64	ind.	\$12.72
family	\$7.43	family	\$14.36	family	\$21.30

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Monthly		Monthly		Monthly	
ind.	\$19.76	ind.	\$37.43	ind.	\$55.09
family	\$32.16	family	\$62.22	family	\$92.28

**Issue Ages: 18-64**

You can choose to enhance your accident policy by adding one or two optional riders. The number of units and the plan selected for the accident riders is equal to the number of units and plan selected for the accident insurance policy.

Optional Rider Benefits	COVERED	BASIC SI	ENHANCED SI	PREMIER SI
<b>Sickness Disability Income Rider (APDIRS) (Primary Insured Only)</b> After the 7-day elimination period (which is not retroactive), AWD pays the amount shown each month up to a <b>maximum of 6 months</b> when the insured employee is totally disabled as described below. For total disability less than one full month, and for which this benefit is payable, 1/30th of the monthly disability income amount is paid for each day.  Total disability resulting from pregnancy or childbirth is covered the same as any covered sickness if the rider has been in effect for the 9 consecutive months preceding the commencement of such total disability. Total disability resulting from complications of pregnancy or childbirth are treated the same as any other sickness.  The insured employee is totally disabled when, due solely to sickness, is under the care of a physician, unless the physician states no further treatment is needed; and is not able to perform all the substantial and material duties of his or her principal occupation; and is not working at any job for pay or profit. (If the insured employee is retired, he or she must be unable to engage in the normal and necessary activities of a retired person of like age and good health)	Employee Only	\$600/mo.	\$1,200/mo.	\$1,800/mo.

**Premiums for Accident Policy (AP3) with Off-the-Job Accident Extended Benefit Rider (AP3EXT) and Sickness Disability Income Rider (APDIRS)** Basic SI Plan has 1 unit each of AP3, AP3EXT and APDIRS. Enhanced SI Plan has 2 units each of AP3, AP3EXT and APDIRS. Premier SI Plan has 3 units each of AP3, AP3EXT and APDIRS.

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Weekly		Weekly		Weekly	
ind.	\$7.84	ind.	\$15.20	ind.	\$22.55
family <sup>†</sup>	\$10.70	family <sup>†</sup>	\$20.92	family <sup>†</sup>	\$31.13

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Monthly		Monthly		Monthly	
ind.	\$33.96	ind.	\$65.83	ind.	\$97.69
family <sup>†</sup>	\$46.36	family <sup>†</sup>	\$90.62	family <sup>†</sup>	\$134.88

**Issue Ages: 18-64** <sup>†</sup> The family and primary insured are covered under the AP3 policy and the Hospital Confinement Benefit of the Off-the-Job Accident Extended Benefit Rider. Only the primary insured is covered under the Sickness Disability Income Rider.

Optional Rider Benefits	COVERED	BASIC SI	ENHANCED SI	PREMIER SI
<b>Outpatient Physician's Treatment Benefit Rider (APOPTR1)</b> AWD pays the amount shown when a covered person is treated by a physician outside of a hospital. This benefit is limited to 2 visits per calendar year, per covered person; and a maximum of 4 visits per calendar year if the policy is in force as family coverage. Treatment can be for sickness, annual wellness exams, or other visits to a physician outside of a hospital.	Employee Spouse Children			
		\$50/visit	\$100/visit	\$150/visit

**Premiums for Accident Policy (AP3) with Off-the-Job Accident Extended Benefit Rider (AP3EXT), Sickness Disability Income Rider (APDIRS) and Outpatient Physician's Treatment Benefit Rider (APOPTR1)** Basic SI Plan has 1 unit each of AP3, AP3EXT, APDIRS, and APOPTR1. Enhanced SI Plan has 2 units each of AP3, AP3EXT, APDIRS, and APOPTR1. Premier SI Plan has 3 units each of AP3, AP3EXT, APDIRS, and APOPTR1.

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Weekly		Weekly		Weekly	
ind.	\$9.55	ind.	\$18.61	ind.	\$27.67
family <sup>††</sup>	\$14.30	family <sup>††</sup>	\$28.12	family <sup>††</sup>	\$41.93

BASIC SI PLAN		ENHANCED SI PLAN		PREMIER SI PLAN	
Monthly		Monthly		Monthly	
ind.	\$41.36	ind.	\$80.63	ind.	\$119.89
family <sup>††</sup>	\$61.96	family <sup>††</sup>	\$121.82	family <sup>††</sup>	\$181.68

**Issue Ages: 18-64** <sup>††</sup> The family and primary insured are covered under the AP3 policy and the Hospital Confinement Benefit of the Off-the-Job Accident Extended Benefit Rider and the Outpatient Physician's Treatment Benefit Rider. Only the primary insured is covered under the Sickness Disability Income Rider.

## Eligibility/ Family Policies/ Termination

Family coverage includes you (the employee), your spouse, and dependent children as defined in the policy. If you die while you have family coverage in force, the policy will continue with your spouse as the primary insured person. If your spouse is covered, his/her coverage ends upon a valid decree of divorce. If your child is covered, his/her coverage ends on the policy anniversary following the date the child is no longer eligible, which is the earlier of when he/she marries, is no longer living with you or turns 21 (25 if a full-time student at a regular educational institution of higher learning beyond high school).

## Renewability

The policy is guaranteed renewable until age 70, subject to change in premiums by class.

## Timing

AWD provides benefits if a covered person sustains an injury which results in a covered loss within 90 days (180 days for dismemberment or death) from the date of the accident. Coverage is effective on the date assigned by the home office and shown on your actual policy.

## Exclusions and Limitations That Apply to Policy AP3 and Rider AP3EXT

If more than one dismemberment, dislocation or fracture is sustained in any one injury, the total amount AWD will pay will not exceed the maximum amount shown in the Benefits section. AWD does not cover any loss as a result of: injuries incurred before the policy date, subject to the Incontestability Provision; or injury incurred that is a result of an on-the-job accident; or any act of war, whether or not declared, participation in a riot, insurrection or rebellion; or suicide or any attempt at suicide, whether sane or insane; or any injuries sustained while under the influence of alcohol or any narcotic, unless administered on the advice of a doctor; or any bacterial infections (except pyogenic infections that occur with and through an accidental cut or wound); or participation in any form of aeronautics except as a fare-paying passenger in a licensed aircraft provided by a common carrier and operating between definitely established airports; or the taking of poison or asphyxiation from or voluntary inhalation of gas or fumes; or committing or attempting to commit an assault or felony; or driving in any organized or scheduled race or speed test or while testing an automobile or any vehicle on any racetrack or speedway; or mental diseases or deficiencies without demonstrable organic disease; or injuries sustained by a dependent child while practicing for or participating in an organized competitive football game; or hernia, including complications due to hernia; or injuries incurred while serving as an active member of the Military, Naval or Air Forces of any country or combination of countries. Upon notice and proof of service in such forces we will return the pro-rata portion of the premium paid for any period of such service. Disability benefits for injuries resulting from a sprained, strained or lame back or any intervertebral disc condition are limited to a maximum of three months for any one injury.

## Termination Provision for All Riders

The riders terminate and are no longer in force on the earliest of: the end of the grace period for the payment of the premium for the policy or the rider; or the date the policy terminates; or the next renewal date after the insured's request to terminate the rider.

## Exclusions and Other Limitations That Apply to Riders APDIRS and APOPTR1

Rider APDIRS does not pay benefits for sickness caused by or resulting from: any act of war, whether or not declared, participation in a riot, insurrection or rebellion; or attempted suicide, while sane or insane; or being intoxicated or under the influence of narcotics or any other controlled substance or drug unless administered upon the advice of a physician; or alcoholism, drug addiction or dependence upon any controlled substance unless administered upon the advice of a physician; or mental illness without demonstrable organic disease; or voluntary inhalation of gas or fumes.

Rider APOPTR1 does not pay benefits for conditions caused by or resulting from: any act of war, whether or not declared, participation in a riot, insurrection or rebellion; or attempted suicide, while sane or insane; or being under the influence of alcohol, narcotics or any other controlled substance or drug unless administered upon the advice of a physician; or alcoholism, drug addiction or dependence upon any controlled substance; or mental illness without demonstrable organic disease; or voluntary inhalation of gas or fumes; or dental or plastic surgery for cosmetic purposes, unless the surgery is required to correct a disorder of normal body functions.

## Riders APDIRS and AP3EXT Contain a Pre-existing Condition Limitation

A pre-existing condition is a condition which manifests itself within 1 year prior to the effective date of coverage or for which medical advice or treatment was recommended by or received from a physician in the 1 year period prior to the effective date of coverage. If the insured has a pre-existing condition, we will not pay benefits for such condition during the 1 year period beginning on the rider date, unless the condition: was disclosed without material misrepresentation in answer to questions in the application for the rider; and is not excluded by name or specific description.

**The policy is a Limited Benefit Accident Policy with Optional Riders.**

*This brochure is for use in New Hampshire.*



Rev. 4/05. Accident insurance benefits provided by policy AP3 or state variations thereof. AP3 is an accident only policy and does not pay benefits for sickness. Off-the-Job Accident Extended Benefit Rider provided by rider AP3EXT, or state variations thereof. Outpatient Physician's Treatment Rider provided by rider APOPTR1, or state variations thereof. Sickness Disability Income Rider provided by rider APDIRS, or state variations thereof. The policy and riders are underwritten by American Heritage Life Insurance Company. This brochure highlights some features of the policy and riders but is not the insurance contract. Only the actual policy and rider provisions control. The policy and riders set forth, in detail, the rights and obligations of both the insured and the insurance company. The policy and riders are not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Workplace Division.

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